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FACSIMILE TRANSMITTAL

DATE: 03/21/2006	FROM: Samuel A. Kassally
TO: Examiner Thu V. Huynh	TELEPHONE NO.: (408) 323-5111
U.S. Patent and Trademark Office	FACSIMILE NO.: (408) 521-0111
Group Art Unit: 2178	ATTY DOCKET NO.: YOR920010745US1
FACSIMILE NO.: 571-273-8300	SUBJECT: Amendment A

Title: "System and Method for Facilitating Document Imaging Requests"

Applicant(s): Bettina Kuppinge et al.

Attorney Docket No.: YOR920010745US1

Serial No.: 10/066,985

Filing Date: February 2, 2002

TOTAL NUMBER OF PAGES INCLUDING THIS COVER PAGE 20

THANK YOU FOR FORWARDING THIS DOCUMENT TO EXAMINER Thu V. Huynh
AS SOON AS POSSIBLE.

Respectfully submitted,

Samuel A. Kassally
Reg. No. 32,247
Date: 03/21/2006

Enclosure: Amendment A

CERTIFICATE OF FAXING

I hereby certify that this correspondence is being faxed to the U.S. Patent and Trademark Office, to fax No. 571-273-8300, on 03/21/2006.

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PTO/SB/21 (09-04)

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

20

Application Number

10/066,985

Filing Date

February 2, 2002

First Named Inventor

Bettina Kuppinger et al.

Art Unit

2178

Examiner Name

Thu V. Huynh

Attorney Docket Number

YOR920010745US1

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> 1) Facsimile cover page <input type="checkbox"/> 2) Certificate of Transmission
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<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Samuel A. Kassatly, Law Office		
Signature			
Printed name	Samuel A. Kassatly		
Date	03/21/2006	Reg. No.	32247

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	
Typed or printed name	Samuel A. Kassatly
Date	03/21/2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04v2)

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<small>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</small>		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	10/066,985
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	February 2, 2002
TOTAL AMOUNT OF PAYMENT (\$)		First Named Inventor	Bettina Kuppinger et al.
TOTAL AMOUNT OF PAYMENT (\$)		Examiner Name	Thu V. Huynh
		Art Unit	2178
		Attorney Docket No.	YOR920010745US1

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>50-0510</u> Deposit Account Name: <u>International Business Machines</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	0
Plant	200	100	300	150	160	80	0
Reissue	300	150	500	250	600	300	0
Provisional	200	100	0	0	0	0	0

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues) Fee (\$) Fee (\$)
 50 25

Each independent claim over 3 (including Reissues) Fee (\$) Fee (\$)
 200 100

Multiple dependent claims Fee (\$) Fee (\$)
 360 180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
				<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
20	- 20 or HP = 0	x 50	= 0	360	0

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
				<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
3	- 3 or HP = 0	x 200	= 0	360	0

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50 =	(round up to a whole number) x	= 0	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Fee Paid (\$)
 0

0

SUBMITTED BY			
<u>Signature</u>			Registration No. (Attorney/Agent) 32247
Name (Print/Type)	Telephone 408-323-5111		
Samuel A. Kassath	Date 03/21/2006		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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